

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

-----X  
CHARLES L. DECESARE,

Plaintiff,

-against-

THE AETNA LIFE INSURANCE CO. and  
THE DRESS BARN LONG TERM  
DISABILITY PLAN,

Defendants.  
-----X

Civil Action No.  
12 Civ. 7162 (KMK)

**PLAINTIFF'S  
SUPPLEMENTAL RULE  
26 DISCLOSURE**

Plaintiff, CHARLES L. DECESARE, by his attorney, LAW OFFICE OF BARBARA A. MATARAZZO, submits the following Supplemental Rule 26 Disclosure:

B. The following document bears significantly on the claims and defenses in this action.

101. MRI Report of October 3, 2013 to Plaintiff's Right Knee. [496-497].

Dated: White Plains, New York  
October 8, 2013

Yours, etc.,  
LAW OFFICE OF BARBARA A. MATARAZZO, ESQ.  
1025 Westchester Avenue – Suite 402  
White Plains, New York 10604  
(914) 346-8088  
*Attorneys for Plaintiff, Charles L. DeCesare*

By: 

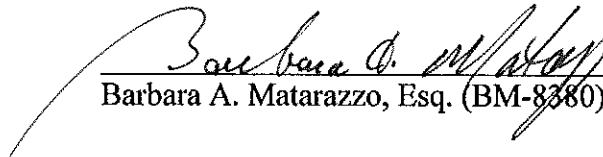
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*Attorneys for Defendant*

**CERTIFICATE OF SERVICE**

I, Barbara A. Matarazzo, hereby certify and affirm that a true and correct copy of the attached **PLAINTIFF'S SUPPLEMENTAL RULE 26 DISCLOSURE** was served via First Class Mail on October 8, 2013, upon the following:

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Barbara A. Matarazzo, Esq. (BM-8380)

**ST. ANTHONY COMMUNITY HOSPITAL***Bon Secours Charity Health System*

15 Maple Ave

Warwick, New York 10990

(845)987-5142

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Patient Name: **DECESARE, CHARLES**

Patient MRUN: 045-098

Date of Birth: 03/06/1954

Patient Sex: Male

Patient Acct. No: 0009772955

Patient Age: 59Y

Patient Location: Outpatient - -

Order Dr.: MICHAEL D.O.BROW

Attending Dr.: MICHAEL D.O.BROW

Alternate Dr.: MICHAEL D.O.BROW

**\*\*\* Final Report \*\*\***

Procedure Date: Oct 3 2013 2:01PM

Admit Date: Oct 3 2013 12:08PM

Admit Diagnosis:

Procedure: **MRI KNEE RT WO CONTRAST**

Reason for Exam: rt knee pain

Accession Number: 8247939

Order Number: 90002

MR of the right knee without gadolinium

performed on 10/3/2013 2:01 PM

for patient Decesare, Charles

male of 59 years

CLINICAL INFORMATION: Rt knee pain

**TECHNIQUE:** Coronal T1-weighted images, sagittal axial and coronal fat-saturated proton density weighted images and coronal T2-weighted images of the knee were obtained.

**FINDINGS:** No prior similar studies are available for review.

The right knee demonstrates advanced arthropathy in the lateral compartment. Patchy regions of cystic change and edema are present, most extensive near the tibial spines. There is full-thickness cartilage loss (grade 4 chondromalacia) over a broad portion of the posterior peripheral aspect of the lateral tibial plateau. There is osseous remodeling in mild collapse of the articular surface. Prominent marginal osteophytes are present. Across the joint space at the lateral femoral condyle there is high grade cartilage loss and surface irregularity (grade 3 chondromalacia). The patellofemoral compartment is largely spared.

The medial meniscus maintains intact morphology. The overlying medial collateral ligament is intact. The association of the deep fibers of the MCL within the medial meniscus is maintained.

The lateral meniscus posterior horn is largely disrupted and time since with a large radial tear. No displaced meniscal fragment is found. The anterior horn has relatively intact morphology. The popliteus demonstrates a sprain injury pattern its musculotendinous junction with intact distal tendon fibers. Fluid

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is also seen tracking proximally with iliotibial band to the femoral metaphysis ; its fibers are intact. The fibular collateral ligament is intact.

The anterior cruciate ligament is thickened and hyperintense, with bright fluid signal intensity invaginating between retained low signal intensity tendon fibers. No rupture has occurred. The posterior cruciate ligament remains intact.

The extensor mechanism appears intact. The quadriceps tendon and its attachment appear unremarkable. The patellar tendon is intact. The superficial prepatellar bursa demonstrates no significant infiltration. The deep infrapatellar bursa demonstrates no significant fluid collection.

A small joint effusion is present. No osseous loose body is recognized. No significant bursa collection is found.

**IMPRESSION:**

1. Severe lateral compartment osteoarthritis with full-thickness chondromalacia, osseous remodeling and partial collapse of the articular surface ; more mild medial compartment involvement ; patellofemoral compartment is spared
2. Lateral meniscus posterior horn large radial tear ; popliteus strain injury at its distal tendinous junction ; iliotibial band cystic change infiltration may reflect iliotibial band syndrome
3. Intensity signal degeneration without rupture ; cystic changes and edema at its tibial plateau and tibial spine attachment
4. Small joint effusion
- 3.

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[Bates 497]

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Docket No.: 12cv7162

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*Plaintiff,*

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THE DRESS BARN LONG TERM DISABILITY PLAN,

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**PLAINTIFF'S SUPPLEMENTAL RULE 26 DISCLOSURE**

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**LAW OFFICE OF BARBARA A. MATARAZZO**

*Attorneys for Plaintiff, Charles L. DeCesare*

Office & P.O. Address:

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White Plains, New York 10604

Tel.: (914) 346-8088

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*Pursuant to 22 NYCRR 130-1.1-a, the undersigned, an attorney admitted to practice in the courts of New York State, certifies that, upon information and belief and reasonable inquiry, (1) the contentions contained in the annexed document are not frivolous and that (2) if the annexed document is an initiating pleading, (i) the matter was not obtained through illegal conduct, or that if it was, the attorney or other persons responsible for the illegal conduct are not participating in the matter or sharing in any fee earned therefrom and that (ii) if the matter involved potential claims for personal injury or wrongful death, the matter was not obtained in violation of 22 NYCRR 1200.41-a.*

*Dated:* \_\_\_\_\_

*Signature* \_\_\_\_\_